

QUARTERLY REPORT ON SAFE WORKING HOURS: RESIDENT DOCTORS AND DENTISTS

University Hospitals Bristol and Weston (UHBW) Bristol sites

1st February to 30th April 2025

Introduction

This paper summarises the mechanisms in place to ensure that safe working practices, for all resident medical and dental staff, are being adhered to across the Bristol sites of the Trust (UHB). A separate report is submitted for Weston sites which have their own Guardian of Safe Working Hours (GOSWH). Information is sourced from the Allocate exception reporting system, HR staffing reports, internal bank and agency reports, Locum's Nest reports and direct email communication. This information is amalgamated and reviewed and is the basis upon which I can give an opinion on compliance with safe working practices.

There is continuing work in progress to further improve the accuracy and validity of the data used as the basis for this report.

Staffing data continues to be problematic and is only felt to be reliable for the Division of Medicine. Data for headcount (as opposed to whole time equivalent WTE) continues to be unavailable. Work is ongoing to try and resolve these issues and it is hoped that the same data sourcing, now being employed in Medicine, will be expanded to all other Divisions in the future. Data, as provided to me, is shown in **Appendix 1**.

Exception reporting data is monitored and collated through an electronic platform, provided by Allocate. This provides a breakdown of exception reports by type, speciality and location (Bristol or Weston). Whilst a small degree of error occurs, usually due to users selecting an incorrect speciality, this data is now felt to give an accurate picture.

I consider exception reporting data to be the most powerful indicator of whether capacity is meeting demand. Exception reporting provides a narrative on the final output of all theoretical staffing modelling, once known and unknown, confounding factors have been factored in. These might include geographical footprint, resource accessibility (particularly IT and dedicated workspace), rota design, sickness, leave of all kinds, covering outliers on unfamiliar wards and the consequences of unscheduled overnight working when non-resident on call (NROC).

Monthly reports, summarising exception reporting (with narrative) by speciality and grade, are forwarded to Divisional and Departmental leads (copied to Director of Medical Education) soon after the month end. The readily accessible data, included in these summaries, continues to be widely welcomed and provides individual departments with a real time overview of exception reporting patterns. This has been shown to contribute towards the implementation of changes to address underlying issues, in real time. Exception reporting data is provided in **Appendix 2** for reference.

Resident doctor and dentist bank and agency locum hours are reported separately for the Bristol and Weston sites and are broken down by speciality and grade. Locum's Nest has become the overwhelming dominant route of sourcing locum cover. At present, Locum's Nest data is not reported to the required level of detail, with most hours falling under the heading of 'General / Acute Medicine'.

This has been escalated for action and continues to be a work in progress. Despite the lack of differentiation between specialities the overall data can be assumed to be accurate. Locum data is provided in **Appendix 3** for reference.

The information available allows triangulation of these three data streams. Staffing and locum data remain sub-optimal, but exception reporting data is reliable and given the most weight. Triangulated data is included in the main report and has been analysed to flag specialities raising concerns relating to capacity and demand. Specialities raising concerns, in any quarter are compared to previous quarters. In the event of sustained concerning data, the speciality will be flagged and highlighted, through the Medical and Dental Workforce Advisory Group (MWAG). This report is also distributed to all speciality and divisional leads with a request that any 'red flags' are reviewed and feedback on action plans provided. Other information brought to the attention of GOSWH, through direct contact or Immediate Safety Concern flags, will also be taken into consideration when making recommendations.

This paper will be presented to the People Committee of Trust Board and MWAG. It is published on the Trusts external website. It may also form part of future CQC inspections.

Background

The 2016 contract (amended in July 2019 following negotiations between NHS employers), and a locally adapted version of it, is now used for all training grade doctors and local equivalents employed by the Trust, from August 2019. The contract requires that regular reports are submitted to the Trust Board describing the way which the Trust is ensuring all resident doctors are working in line with safe working regulations.

University Hospitals Bristol and Weston Foundation Trust operates over two geographically remote sites with replication of departments over the two sites. Each site presents many different challenges, specific to location, with local knowledge being of paramount importance in understanding and addressing these often-complex issues. For this reason, separate guardians are appointed for each location. Currently Dr James McDonald (BRI ED Consultant) covers the Bristol sites and Dr William Hicks (WGH Radiology Consultant) covers Weston General Hospital. There has been significant progress made towards collaborative working between both guardians and work is ongoing to try and align as many of the common processes as possible across both sites. At present, the differences, and geographical separation, between the two sites makes writing a single report for UHBW impractical. This report is from the Bristol based GOSWH, James McDonald, and refers to the Bristol hospitals of UHBW. In the longer term, it is planned that a new Guardian will be appointed to develop the role to cover the entire Trust. This is scheduled for June 2026.

High level data for Bristol sites of UHBW

Total number of junior doctors/dentists (Headcount): **Information not available**

Number of whole-time equivalents in post: **779**

Number of junior doctors/dentists in training: **545** (of which 354 Full time, 191 Less than full time)

Number of locally employed doctors: **Information not available**

Amount of time available in job plan for guardian: 2 PAs

Amount of job-planned time for educational supervisors: 0.125 PAs per trainee

Establishment by division is shown in the following table: (previous quarter)

	Establishment WTE	Locum WTE
D&T	1.12 (-1.80)	1.40 (0.20)
Medicine	22.62 (6.84)	8.96 (15.28)
Specialised	3.35 (0.70)	5.84 (6.21)
Surgery	-16.52 (6.80)	14.30 (15.32)
Women and Children's	43.65 (44.20)	11.80 (5.82)
TOTAL	54.22 (56.74)	42.30 (42.83)

Both overall establishment and locum hours remain stable for this quarter.

Of note is the apparent disparity between establishment and the need for locum hours, across all divisions except Surgery, which suggests that a significant Trust wide WTE equivalent planned workforce deficit exists. Overall locum hours, for the quarter, are both reliable and stable representing over 42 WTE. This is equivalent to approximately 5% of the overall WTE workforce. If reported WTE over establishment, against funded, of 54.22 is taken into account it would suggest that, to meet current demand, planned WTE would need to increase by approximately 13% or 100 full time posts, across UHB, to negate the need for unplanned over establishment and excessive locum spend.

This apparent funded WTE staffing deficit is stable compared to previous quarters.

Exception reports

Summarised data, manually extracted from the Allocate exception reporting system, is provided in **appendix 2** for reference.

This quarter shows a significant decrease in overall exception reports (86 vs 173 last quarter) and also a significant decrease compared to the same quarter last year (107). This is encouraging especially given that there were no reports flagged as raising an Immediate Safety Concern (ISC). Several specialities show dramatically reduced levels of reporting (Oncology, Respiratory Medicine, O&G) which hopefully reflects implementation of positive workforce and environmental changes.

Almost all reports highlight additional hours being worked to meet workload. This suggests that a deficit of capacity exists against demand, once all factors have been accounted for. High levels of exception reporting continue to be seen in Care of the Elderly and Cardiology.

Immediate safety concerns (ISC)

No exception reports were flagged as representing an Immediate Safety Concern this quarter.

Other

OMFS

Serious concerns were raised by OMFS residents concerning multiple issues within the speciality. One area of concern focused on working patterns which were claimed to be neither compliant with the rota rules nor agreed work schedules. To compound this a culture of discouraging exception reporting was reported to pervade. No exception reports had been received historically. To gather data and evidence relating to this issue it was agreed that residents would be allowed to exception report without any notification being made to their supervisors or the department – effectively anonymising reports. As Guardian I wrote to all residents explaining this process and asking for their help in collecting this data. A face-to-face meeting was held to reinforce the Trust's support for this intervention. Exception reports have started to come forward and these are being summarised and forwarded to the team leading this investigation.

Work schedule reviews:

Surgery. Continued use of simple repeating patterns which do not match placement length. This leads to a variation in night and weekend working between different individuals on the rota. Aside from residents requesting additional payment for working beyond their generic work schedule this will also cost the Trust money as an equal number of residents will be overpaid. One solution would be to either manipulate the rota, line by line, to ensure that all lines match the generic work schedule or to create bespoke work schedules for everyone. The current situation is resulting in requests for work schedule reviews and exception reports which are not appropriate.

Pre-Hospital Emergency Medicine (PHEM). No communication between PHEM rota and ED rota leading to non-compliant working patterns. This has been resolved.

Fines.

Five fines were issued, for rota rule breaches in this quarter, as follows:

- 48-hour average week rule Cardiology. Nine incidents £404.45

The Resident Doctor's Forum continues to enjoy increased attendance since being rescheduled as a monthly lunchtime meeting. Refreshments and cakes are provided and funded from the Guardian fines account.

Further ongoing expenditure from the Guardian fines account includes breakfast club funding in Oncology and Trauma and Orthopaedics. The Guardian fines account currently has a balance of £14,254.69. Ideas for using some of these funds are invited.

Multiple specialities continue to report locally employed doctor resignations over the summer, to be an increasing problem and contributing factor in workforce deficits. Residents are resigning early after success in gaining training programme places starting in August. This is a significant problem, in my own speciality (A&E). One proposed solution is to increase notice periods from one to three months.

No progress has been made in reinstating study budget for locally employed resident doctors. This makes UHBW an outlier in the region. This is causing significant unhappiness amongst residents. A suggested action to put in PCP requests for funding, when recruiting to vacancies, has not resulted in any requests being agreed to my knowledge.

Locum bookings

Summarised data, provided by the UHBW Locum bank, Agency locum administrators and Locum's Nest is provided in **Appendix 3** for reference.

As previously discussed, the data provided for Locum's Nest bookings is not robustly broken down by specialty and grade (there are very large, pooled figures for 'Medicine' and 'Surgery' with no alignment against specialty and grade).

Overall locum hours, for the quarter, represent over 42 WTE which is equivalent to approximately 5% of the overall WTE workforce. This appears to be stable despite increased establishment. If reported over establishment, against funded, is considered this would suggest that, to meet current demand, planned WTE would need to increase by approximately 13% or 100 full time posts, across UHB. This would potentially save, rather than increase, spending and lead to more reliability for real life capacity to meet demand.

Triangulated data: Staffing, exception reporting and locum February, March, April 2025

Blank cells indicate a value of zero (or no data available).

Patterns showing concerning frequency of exception reporting, or locum hours, are highlighted as **RED** indicative of compromised capacity vs demand.

Speciality	Grade	Over/ under establishment (WTE)	Exception reports (ISC)	Total locum hours	Total locum WTE	Comment
A&E Bristol	FY1				2.00	Staffing and locum data now accurate.
	FY2	1.00				
	ST1-2	1.26		825		
	ST3+	0.65		216.5		
Acute Medicine	FY1		1		Unknown	Locum data continues to be problematic due to NEST amalgamating medical specialities.
	FY2	1.00				
	ST1-2	2.07	2			
	ST3+	0.90				
Care of the Elderly	FY1	(1.00)	4		0.44	Continued concerning levels of exception reporting.
	FY2		1			
	ST1-2	(0.30)	9			
	ST3+	0.92		230		
Dermatology	FY1				0.37	
	FY2					
	ST1-2	(2.00)				
	ST3+	2.82	5			
	Unknown			192		
Diabetes and Endocrinology	FY1					
	FY2					
	ST1-2	0.15				
	ST3+	0.61				
Gastroenterology	FY1					
	FY2					
	ST1-2	0.20				
	ST3+	0.34				
Hepatology	FY1				0.03	
	FY2					
	ST1-2	(0.06)	2			
	ST3+	(0.20)		16		
Liaison Psychiatry	FY1	3.00				
	FY2	3.00				
	ST1-2					
	ST3+					

Speciality	Grade	Over/ under establishment (WTE)	Exception reports	Total Locum Hours	Total locum WTE	Comment
Respiratory Medicine	FY1	2.00			0.05	Significant reduction in exception reporting (7 vs 28 last quarter)
	FY2					
	ST1-2	1.14	7	16		
	ST3+	(2.08)		8		
General Internal Medicine (A518)	FY1					
	FY2					
	ST1-2	1.80				
	ST3+					
Rheumatology	FY1					
	FY2					
	ST1-2	(1.00)				
	ST3+	3.01				
SARC (Sexual assault referral centre)	FY1					
	FY2					
	ST1-2	2.00				
	ST3+	(0.17)				
Unity Sexual Health	FY1					
	FY2					
	ST1-2					
	ST3+					
Sleep / NIV	FY1					
	FY2					
	ST1-2					
	ST3+	(0.20)				
'General / Acute Medicine' (Unspecified)	FY1			298	6.07	Unable to comment as NEST data is not available for specialities. Suggests workforce deficit.
	FY2	(0.20)		18		
	ST1-2	1.20		2494		
	ST3+	0.76		348		
Medicine Out of hours and take	FY1		1			Likely skewed with data conflated with 'General / Acute Medicine'.
	FY2					
	ST1-2					
	ST3+					

Speciality	Grade	Over/ under establishment (WTE)	Exception Reports	Total Locum Hours	Total locum WTE	Comment
Anaesthetics	FY1				1.15	Staffing data now accurate.
	FY2					
	ST1-2	1.30				
	ST3+	(0.43)		597		
Cardiac Anaesthetics	FY1					
	FY2					
	ST1-2					
	ST3+					
Colorectal Surgery	FY1					
	FY2					
	ST1-2					
	ST3+		2	4		
Endoscopy	FY1					
	FY2					
	ST1-2					
	ST3+					
ENT	FY1				1.12	
	FY2					
	ST1-2		2	295		
	ST3+	(1.07)		18		
	Unknown			270		
Hepatobiliary Surgery	FY1		2			
	FY2		1			
	ST1-2					
	ST3+					
Intensive Care	FY1	1.00			5.33	Staffing data confirmed. Apparent under recruitment and associated high locum spend.
	FY2	(4.03)				
	ST1-2	(1.16)		372		
	ST3+	(5.12)		2402		
Oesophago-Gastric Surgery	FY1					
	FY2					
	ST1-2					
	ST3+					

Speciality	Grade	Over/ <u>under</u> establishment (WTE)	Exception Reports	Total Locum Hours	Total locum WTE	Comment
Ophthalmology	FY1				1.06	
	FY2					
	ST1-2	(1.00)				
	ST3+	(0.18)	5	552		
Oral Maxillofacial Surgery	FY1				1.10	
	FY2					
	ST1-2			62		
	ST3+	(2.06)		508.5		
Thoracic Surgery Cardiothoracics	FY1				2.15	
	FY2					
	ST1-2			132		
	ST3+	(1.00)		534		
	Unknown			451		
Trauma and Orthopaedics	FY1				0.48	
	FY2					
	ST1-2	1.97	2	180		
	ST3+	(1.51)		58		
'General surgery' (Unspecified)	FY1	0.62			1.59	
	FY2	(0.03)				
	ST1-2			566		
	ST3+	(3.82)		262		
Surgery Out of hours and take	FY1					
	FY2					
	ST1-2					
	ST3+					
Dental	FY1				0.23	
	FY2					
	ST1-2			77.8		
	ST3+			55.7		

Speciality	Grade	Over/ under establishment (WTE)	Exception Reports	Total Locum Hours	Total locum WTE	Comment
Cardiac Surgery	FY1					
	FY2					
	ST1-2	(1.00)				
	ST3+	0.94				
Cardiac MRI	FY1					
	FY2					
	ST1-2					
	ST3+	(0.50)				
Cardiology	FY1	(1.00)	26		2.72	Very high levels of exception reporting in FY1 tier. High locum spend.
	FY2					
	ST1-2	0.94	1	1101		
	ST3+	1.19	1	312		
Clinical Genetics	FY1					
	FY2					
	ST1-2					
	ST3+	(2.00)				
Haematology	FY1				1.40	
	FY2					
	ST1-2	2.00		374.2		
	ST3+	(1.97)		354		
Oncology	FY1	0.50		7	1.72	Exception reporting significantly reduced (2 vs 22 with 3 ISC last quarter)
	FY2	(1.00)				
	ST1-2	1.00		798		
	ST3+	2.48	2	91		
Palliative Care	FY1				-	
	FY2					
	ST1-2	0.10				
	ST3+	0.67				
St Peter's Hospice	FY1					
	FY2					
	ST1-2					
	ST3+					

Speciality	Grade	Over/ <u>under</u> establishment (WTE)	Exception reports	Total Locum Hours	Total locum WTE	Comment
Community Paediatrics	FY1					
	FY2					
	ST1-2	(0.04)				
	ST3+					
General Paediatrics	FY1				1.23	
	FY2	1.83	1			
	ST1-2	3.65		114		
	ST3+	15.54	1	556		
General Paediatrics OOH and take	FY1					
	FY2					
	ST1-2					
	ST3+					
SoNAR	FY1				3.21	
	FY2					
	ST1-2					
	ST3+			263		
	Unknown			1407		
Neonatal Intensive Care (NICU)	FY1				0.51	Questionable staffing data.? Conflated with retrieval service.
	FY2					
	ST1-2	(1.59)		13		
	ST3+	6.35	3	251		
O&G	FY1	(1.00)			1.62	Exception reporting significantly reduced (1 vs 16)
	FY2					
	ST1-2	1.00	1	530.3		
	ST3+	2.41		311		
Paediatric A&E	FY1				1.53	
	FY2					
	ST1-2	0.20		249		
	ST3+	(0.10)		547		
Paediatric Anaesthetics	FY1					
	FY2					
	ST1-2	(1.00)				
	ST3+	0.70				
Paediatric 'medical specialities'	FY1					
	FY2					
	ST1-2					
	ST3+					
Paediatric Obesity	ST3+	(0.10)				

Speciality	Grade	Over/ under establishment (WTE)	Exception Reports	Total Locum Hours	Total Locum WTE	Comment
Paediatric Cardiac Surgery	FY1				1.23	
	FY2					
	ST1-2					
	ST3+	(2.00)		640		
Paediatric Cardiology	FY1				0.78	
	FY2					
	ST1-2	1.65		12		
	ST3+	1.54		392		
Paediatric Surgery	FY1				0.53	
	FY2					
	ST1-2	(0.11)		13		
	ST3+	(0.08)		260		
Paediatric Intensive Care (PICU)	FY1				0.47	Questionable staffing data.? conflated with retrieval service
	FY2					
	ST1-2	3.84		20		
	ST3+	9.80	2	225		
Paediatric Neurosurgery	FY1				0.50	Staffing issues apparently resolved.
	FY2					
	ST1-2					
	ST3+	1.00		260		
Paediatric Oncology and Haematology	FY1				0.15	
	FY2					
	ST1-2					
	ST3+	(1.84)		78		
Paediatric Plastic Surgery / Burns	FY1					
	FY2					
	ST1-2					
	ST3+					
Paediatric Trauma and Orthopaedic Surgery	FY1					
	FY2					
	ST1-2	2.00				
	ST3+					
Cardiac services	FY1					
	FY2					
	ST1-2					
	ST3+					

Speciality	Grade	Over/ under establishment (WTE)	Exception Reports	Total Locum Hours	Total Locum WTE	Comment
Paediatric neurology	FY1					
	FY2					
	ST1-2					
	ST3+					
Paediatric respiratory	FY1					
	FY2					
	ST1-2					
	ST3+					
Paediatric Edndocrinology	FY1					
	FY2					
	ST1-2					
	ST3+					
Radiology	FY1				1.35	
	FY2					
	ST1-2	0.16		8		
	ST3+	2.79		48		
	Unknown			647		
Microbiology Pathology	FY1					
	FY2					
	ST1-2	(1.83)				
	ST3+					
Laboratory Medicine	FY1					
	FY2					
	ST1-2					
	ST3+					
Clinical Teaching Fellow	FY1					
	FY2					
	ST1-2					
	ST3+					
Occupational Health	FY1					
	FY2					
	ST1-2					
	ST3+					
Other	FY1					
	FY2					
	ST1-2					
	ST3+					

Discussion

Care of the Elderly and Cardiology continue to return concerning levels of exception reporting. Intensive Care appears to suffer from chronic under recruitment associated with very high locum use.

Respiratory Medicine, O&G and Oncology have returned dramatic reductions in exception reporting levels.

Summary

There has been no objective evidence arising from direct communication, or the exception reporting system, to suggest that the resident doctors and dentists at the Bristol sites of UHBW are working on rotas which are non-compliant by design. The requirement for HR to run all work schedules through compliance software should flag any issues of this nature resulting in either redesign, by the departmental rota lead, or involvement of GOSWH if not resolved.

It remains my view that all rotas should be overseen by a substantive senior clinician, with job planned time for this activity.

The loss of support for the provision of staffing data continues to impact this report but measures are being taken to establish alternative options.

Locum's Nest is now the main route for sourcing locum cover with an insignificant fraction now coming from UHBW staff locum bank. No agency locum use was seen in this quarter. This makes it essential for Medical Rostering to be able to start reporting data broken down by speciality and grade. This remains a work in progress and is proving frustrating to accomplish. NEST report that they have completed all software development necessary for the Trust to implement 'Shift tagging' as the proposed solution to this problem.

Overall exception reporting data shows a marked reduction compared to both the previous quarter and the same quarter in 2024. Almost all exception reports relate to additional hours being worked. High levels of locum hours are also seen in some areas, most likely reflecting an under-resourced workforce. Formal, capacity vs demand exercises are recommended with assessment of staffing requirements including realistic contingency for sickness, leave and maternity cover.

Significant reductions in exception reporting are noted across several previously concerning specialities.

The planned workforce deficit against the actual workforce requirement is increasing with figures suggesting a shortfall of around 100 posts.

The complete loss of any study budget, for locally employed doctors and dentists, is a source of significant dissatisfaction. UHBW is a regional outlier, in this lack of provision, which may impact on recruitment.

At the time of writing no further information has been provided regarding enquiries into extending notice periods for locally employed doctors, to ameliorate the large number of summer resignations.

James McDonald. Guardian of Safe Working Hours (Bristol).

3rd July 2025.

Appendix 1. UHBW Resident Staffing Report as at: March 2025 Division of Medicine

Specialty	Grade	Budget WTE	Staff in Post WTE	Establishment Over / Under WTE
Care of the Elderly	FY1	7.00	6.00	(1.00)
	FY2	5.00	5.00	0.00
	ST1-2	12.00	11.70	(0.30)
	ST3+	9.30	10.22	0.92
Care of the Elderly Total				(0.38)
Dermatology	ST1-2	3.00	1.00	(2.00)
	ST3+	2.00	4.82	2.82
Dermatology Total				0.82
Emergency Department	FY2	0.00	1.00	1.00
	ST1-2	31.00	32.26	1.26
	ST3+	17.72	18.37	0.65
Emergency Dept Total				2.91
'General Medicine'	FY2	8.00	7.80	(0.20)
	ST1-2	5.00	6.20	1.20
	ST3+	2.00	2.76	0.76
General Medicine Total				1.76
Respiratory	FY1	6.00	8.00	2.00
	ST1-2	8.00	9.14	1.14
	ST3+	7.00	4.92	(2.08)
Respiratory Total				1.06
Rheumatology	ST1-2	2.00	1.00	(1.00)
	ST3+	2.80	5.81	3.01
Rheumatology Total				2.01
Sexual Health	FY2	0.00	0.00	0.00
	ST1-2	1.00	3.00	2.00
	ST3+	5.00	4.83	(0.17)
Sexual Health Total				1.83
Sleep	ST3+	1.00	0.80	(0.20)
Sleep Total				(0.20)
Hepatology	FY1	2.00	2.00	0.00
	ST1-2	3.00	2.94	(0.06)
	ST3+	2.00	1.80	(0.20)
Hepatology Total				(0.26)
Gastroenterology	FY1	3.00	3.00	0.00
	ST1-2	2.00	2.20	0.20
	ST3+	4.00	4.34	0.34
Gastroenterology Total				0.54

**Appendix 1. UHBW Resident Staffing Report as at: March 2025 Division of Medicine
continued**

Specialty	Grade	Budget WTE	Staff in Post WTE	Establishment Over / Under WTE
Acute Medicine	FY1	2.00	2.00	0.00
	FY2	0.00	1.00	1.00
	ST1-2	5.00	7.07	2.07
	ST3+	3.00	3.90	0.90
Acute Medicine Total				3.97
Liaison Psychiatry	FY1	0.00	3.00	3.00
	FY2	0.00	3.00	3.00
Liaison Psych Total				6.00
GIM	ST1-2	5.00	6.80	1.80
	ST3+	0.00	0.00	0.00
GIM Total				1.80
Endocrinology & Diabetes	ST1-2	1.00	1.15	0.15
	ST3+	3.00	3.61	0.61
Endo & Diabetes Total				0.76
Grand Total		169.82	192.44	22.62

UHBW Resident Staffing Report as at: March 2025 Division of Surgery

Specialty	Grade	Budget WTE	Staff in Post WTE	Establishment Over / Under WTE
Anaesthetics	ST1-2	3.00	4.30	1.30
	ST3+	35.00	34.57	(0.43)
Anaesthetics Total		38.00	38.87	0.87
Intensive Care	FY1	1.00	2.00	1.00
	FY2	7.00	2.97	(4.03)
	ST1-2	8.50	7.34	(1.16)
	ST3+	29.71	24.59	(5.12)
Intensive Care Total		46.21	36.90	(9.31)
Endoscopy	ST3+	1.00	1.00	0.00
ENT	ST1-2	11.00	11.00	0.00
	ST3+	8.00	6.93	(1.07)
ENT Total		19.00	17.93	(1.07)
General Surgery	FY1	12.38	13.00	0.62
	FY2	3.00	2.97	(0.03)
	ST1-2	5.00	5.00	0.00
	ST3+	14.50	10.68	(3.82)
General Surgery Total		34.88	31.65	(3.23)
OMFS	ST3+	7.00	4.94	(2.06)
Ophthalmology	ST1-2	2.00	1.00	(1.00)
	ST3+	29.00	28.82	(0.18)
Ophthalmology Total		31.00	29.82	(1.18)
Thoracic Surgery	ST3+	4.00	3.00	(1.00)
Trauma & Orthopaedics	FY1	3.00	3.00	0.00
	FY2	3.00	3.00	0.00
	ST1-2	9.00	10.97	1.97
	ST3+	11.00	9.49	(1.51)
T&O Total		26.00	26.46	0.46
Grand Total		207.09	190.57	(16.52)

UHBW Resident Staffing Report as at: December 2024 Division of Specialised Services

Specialty	Grade	Budget WTE	Staff in Post WTE	Establishment Over / Under WTE
Cardiac MRI	ST3+	3.50	3.00	(0.50)
Cardiac Surgery	ST1-2	1.00	0.00	(1.00)
	ST3+	14.00	14.94	0.94
Cardiac Surgery Total		15.00	14.94	(0.06)
Cardiology	FY1	6.00	5.00	(1.00)
	ST1-2	11.00	11.94	0.94
	ST3+	16.00	17.19	1.19
Cardiology Total		33.00	34.13	1.13
Clinical Genetics	ST3+	2.00	0.00	(2.00)
Haematology	FY1	1.00	1.00	0.00
	FY2	1.00	1.00	0.00
	ST1-2	2.00	4.00	2.00
	ST3+	16.90	14.93	(1.97)
Haematology Total		20.90	20.93	0.03
Oncology	FY1	1.50	2.00	0.50
	FY2	2.00	1.00	(1.00)
	ST1-2	9.00	10.00	1.00
	ST3+	18.60	21.08	2.48
Oncology Total		31.10	34.08	2.98
Palliative Care	ST1-2	1.90	2.00	0.10
	ST3+	4.20	4.87	0.67
Palliative Care Total		6.10	6.87	0.77
R&I	ST3+	1.00	1.00	0.00
Grand Total		106.6	109.95	3.35

UHBW Resident Staffing Report March 2025 Division of W&C	Grade	Budget WTE	Staff in Post WTE	Establishment Over / Under WTE
NICU	ST1-2	10.00	8.41	(1.59)
	ST3+	15.60	21.95	6.35
NICU Total		25.60	30.36	4.76
Obstetrics & Gynaecology	FY1	2.00	1.00	(1.00)
	FY2	3.00	3.00	0.00
	ST1-2	8.00	9.00	1.00
	ST3+	19.48	21.89	2.41
O&G Total		32.48	34.89	2.41
Paediatric A&E	ST1-2	9.00	9.20	0.20
	ST3+	15.00	14.90	(0.10)
Paed A&E Total		24.00	24.10	0.10
Paed Anaesthetics	ST1-2	1.00	0.00	(1.00)
	ST3+	7.00	7.70	0.70
Paed Anaesthetics Total		8.00	7.70	(0.30)
Paed Burns	ST3+	5.00	5.00	0.00
Paed Cardiac Surgery	ST3+	3.00	1.00	(2.00)
Paed Cardiology	ST1-2	1.00	2.65	1.65
	ST3+	8.00	9.54	1.54
Paed Cardiology Total		9.00	12.19	3.19
General Paediatrics	FY2	6.00	7.83	1.83
	ST1-2	13.00	16.65	3.65
	ST3+	27.00	42.54	15.54
General Paediatrics Total		46.00	67.02	21.02
Paediatric General Surgery	FY2	1.00	1.00	0.00
	ST1-2	6.00	5.89	(0.11)
	ST3+	9.00	8.92	(0.08)
Paediatric Gen Surgery Total		16.00	15.81	(0.19)
Paed Haematology & Oncology	ST3+	7.00	5.16	(1.84)
Paed Neurosurgery	ST3+	6.00	7.00	1.00
Paed Obesity	ST3+	0.80	0.70	(0.10)
Paed Trauma & Orthopaedics	ST1-2	3.00	5.00	2.00
	ST3+	7.00	7.00	0.00
Paed T&O Total		10.00	12.00	2.00
Community Paediatrics	ST1-2	4.00	3.96	(0.04)
	ST3+	5.30	5.30	0.00
Community Paeds Total		9.30	9.26	(0.04)
PICU	ST1-2	3.00	6.84	3.84
	ST3+	16.23	26.03	9.80
PICU Total		19.23	32.87	13.64
Grand Total		221.41	265.06	43.65

UHBW Resident Staffing Report as at: December 2024 Division of D&T

Specialty	Grade	Budget WTE	Staff in Post WTE	Establishment Over / Under WTE
Pathology	ST1-2	2.00	0.17	(1.83)
Pathology Total		2.00	0.17	(1.83)
Radiology	ST1-2	8.86	9.02	0.16
	ST3+	9.00	11.79	2.79
Radiology Total		17.86	20.81	2.95
Grand Total		19.86	20.98	1.12

Appendix 2.

Summary of exception reports by specialty, grade, and reason February, March, April 2025

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Acute Medicine	FY1	1						1
	FY2							
	ST1-2	2						2
	ST3+							
	Sum	3						3

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Care of the Elderly	FY1	3				1		4
	FY2	1						1
	ST1-2	9						9
	ST3+							
	Sum	13				1		14

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Diabetes and endocrine	FY1							
	FY2							
	ST1-2							
	ST3+							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Dermatology	FY1							
	FY2							
	ST1-2							
	ST3+	5						5
	Sum	5						5

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Gastro enterology	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Hepatology	FY1							
	FY2							
	ST1-2	2						2
	ST3+							
	Sum	2						2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Respiratory Medicine	FY1							
	FY2							
	ST1-2	7						7
	ST3+							
	Sum	7						7

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
General Internal Medicine (A528)	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Medicine OOH and take	FY1					1		1
	FY2							
	ST1-2							
	ST3+							
	Sum					1		1

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Colorectal Surgery	FY1							
	FY2							
	ST1-2							
	ST3+	2						2
	Sum	2						2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Oesophago-gastric surgery	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
HPB Surgery	FY1	2						2
	FY2	1						1
	ST1-2							
	ST3+							
	Sum	3						3

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Ophthalmology	FY1							
	FY2							
	ST1-2							
	ST3+	5						5
	Sum	5						5

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Thoracic surgery	FY1							
	FY2							
	ST1-2							
	ST3+							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
T&O	FY1							
	FY2							
	ST1-2			1		1		2
	ST3+							
					1		1	

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
ENT	FY1							
	FY2							
	ST1-2	2						2
	ST3+							
	Sum	2						2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Surgery and OOH Take	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Haematology	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Cardiology	FY1	24	1			1		26
	FY2							
	ST1-2	1						1
	ST3+	1						1
	Sum	26	1			1		28

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Oncology	FY1							
	FY2							
	ST1-2							
	ST3+	1			1			2
	Sum	1			1			2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
St Peter's Hospice	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
General Paediatrics	FY1							
	FY2	1						1
	ST1-2							
	ST3+					1		1
	Sum	1				1		2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Paediatrics OOH and take	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Paediatric A&E	FY1							
	FY2							
	ST1-2							
	ST3+							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Paediatric neurology	FY1							
	FY2							
	ST1-2							
	ST3+							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Paediatric Endocrine	FY1							
	FY2							
	ST1-2							
	ST3+	2						2
		2						2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Paediatric Respiratory	FY1							
	FY2							
	ST1-2							
	ST3+							

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
NICU	FY1							
	FY2							
	ST1-2							
	ST3+	2			1			3
		2			1			3

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
O&G	FY1							
	FY2							
	ST1-2	1						1
	ST3+							
	Sum		1					1

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
PICU	FY1							
	FY2							
	ST1-2							
	ST3+	2						2
	Sum	2						2

	Grade	Hours	Service Support	Breaks	Pattern	Education	ISC	Total (ISC)
Paediatric T&O	FY1							
	FY2							
	ST1-2							
	ST3+							
	Sum							

Total exception reports this quarter (ISC): 86 (0)

Total exception reports last quarter: 173 (5)

Total exception reports same quarter previous year: 107 (0)

Appendix 3. UHBW Resident Locum Report for Quarter: February, March, April 2025

Division of Medicine. Hours.

Speciality	Grade	Bank	Agency	Nest	Total
A&E Bristol	FY1				
	FY2				
	ST1-2			825	825
	ST3+	51.5		165	216.5
Acute Medicine	FY1				
	FY2				
	ST1-2				
	ST3+				
Care of the Elderly	FY1				
	FY2				
	ST1-2				
	ST3+	230			230
Dermatology	FY1				
	FY2				
	ST1-2				
	ST3+				
	Unknown			192	192
Diabetes and Endocrinology	FY1				
	FY2				
	ST1-2				
	ST3+				
Gastroenterology	FY1				
	FY2				
	ST1-2				
	ST3+				
Hepatology	FY1				
	FY2				
	ST1-2				
	ST3+	16			16
Liaison Psychiatry	FY1				
	FY2				
	ST1-2				
	ST3+				

Medicine locum hours continued

Speciality	Grade	Bank	Agency	Nest	Total
Respiratory Medicine	FY1				
	FY2				
	ST1-2			16	16
	ST3+			8	8
Rheumatology	FY1				
	FY2				
	ST1-2				
	ST3+				
SARC (Sexual assault referral centre)	FY1				
	FY2				
	ST1-2				
	ST3+				
Unity Sexual Health	FY1				
	FY2				
	ST1-2				
	ST3+				
Sleep / NIV	FY1				
	FY2				
	ST1-2				
	ST3+				
'General / Acute Medicine'	FY1			298	298
	FY2			18	18
	ST1-2			2494	2494
	ST3+			348	348
Out of Hours and take	FY1				
	FY2				
	ST1-2				
	ST3+				

Total for Division of Medicine: 4661.5 locum hours (8.96 WTE)

UHBW Resident Locum Report for Quarter: February, March, April 2025.

Division of Surgery. Hours.

Speciality	Grade	Bank	Agency	Nest	Total
Anaesthetics	FY1				
	FY2				
	ST1-2				
	ST3+			597	597
Cardiac Anaesthetics	FY1				
	FY2				
	ST1-2				
	ST3+				
Colorectal Surgery	FY1				
	FY2				
	ST1-2				
	ST3+			4	4
	Unknown				
Endoscopy	FY1				
	FY2				
	ST1-2				
	ST3+				
ENT	FY1				
	FY2				
	ST1-2			295	295
	ST3+			18	18
	Unknown			270	270
Hepatobiliary Surgery	FY1				
	FY2				
	ST1-2				
	ST3+				
Intensive Care	FY1				
	FY2				
	ST1-2			372	372
	ST3+	12		2390	2402
Oesophago-Gastric Surgery	FY1				
	FY2				
	ST1-2				
	ST3+				

Division of Surgery February, March, April 2025 continued

Speciality	Grade	Bank	Agency	Nest	Total
Ophthalmology	FY1				
	FY2				
	ST1-2				
	ST3+			552	552
Oral Maxillofacial Surgery	FY1				
	FY2				
	ST1-2			62	62
	ST3+	30.5		478	508.5
Thoracic Surgery Cardiothoracics	FY1				
	FY2				
	ST1-2			132	132
	ST3+			534	534
	Unknown			451	451
Trauma and Orthopaedics	FY1				
	FY2				
	ST1-2			180	180
	ST3+			58	58
'General surgery' (unspecified)	FY1			17	17
	FY2				
	ST1-2			566	566
	ST3+			262	262
Dental	FY1				
	FY2				
	ST1-2	77.8			77.8
	ST3+	55.7			55.7

Total for Division of Surgery: 7414 Locum hours (14.3 WTE)

UHBW Resident Locum Report for Quarter: February, March, April 2025

Division of Specialised Services. Hours.

Speciality	Grade	Bank	Agency	Nest	Total
Cardiac Surgery	FY1				
	FY2				
	ST1-2				
	ST3+				
Cardiac MRI	FY1				
	FY2				
	ST1-2				
	ST3+				
Cardiology	FY1				
	FY2				
	ST1-2			1101	1101
	ST3+			312	312
Clinical Genetics	FY1				
	FY2				
	ST1-2				
	ST3+				
Haematology	FY1				
	FY2				
	ST1-2		246.2	128	374.2
	ST3+			354	354
Oncology	FY1			7	7
	FY2				
	ST1-2			798	798
	ST3+	9		82	91
Palliative Care	FY1				
	FY2				
	ST1-2				
	ST3+				

Total for Specialised services: 3037.2 Locum hours (5.84 WTE)

UHBW Resident Locum Report for Quarter: February, March, April 2025

Division of Women and Children's. Hours

Speciality	Grade	Bank	Agency	Nest	Total
Community Paediatrics	FY1				
	FY2				
	ST1-2				
	ST3+				
General Paediatrics	FY1				
	FY2				
	ST1-2			114	114
	ST3+	65		491	556
SoNAR	FY1				
	FY2				
	ST1-2				
	ST3+			263	263
	Unknown			1407	1407
Neonatal Intensive Care (NICU)	FY1				
	FY2				
	ST1-2			13	13
	ST3+			251	251
O&G	FY1				
	FY2				
	ST1-2		387.3	143	530.3
	ST3+			311	311
Paediatric A&E	FY1				
	FY2				
	ST1-2			249	249
	ST3+			547	547
Paediatric Anaesthetics	FY1				
	FY2				
	ST1-2				
	ST3+				
Paediatric Cardiac Surgery	FY1				
	FY2				
	ST1-2				
	ST3+			640	640

Division of Women and Children's February, March, April 2025 cont.

Speciality	Grade	Bank	Agency	Nest	Total
Paediatric Cardiology	FY1				
	FY2				
	ST1-2			12	12
	ST3+			392	392
Paediatric General Surgery	FY1				
	FY2				
	ST1-2			13	13
	ST3+			260	260
Paediatric Intensive Care (PICU)	FY1				
	FY2				
	ST1-2	20			20
	ST3+	225			225
Paediatric Neurosurgery	FY1				
	FY2				
	ST1-2				
	ST3+			260	260
Paediatric Neurology	FY1				
	FY2				
	ST1-2				
	ST3+				
Paediatric Oncology and Haematology	FY1				
	FY2				
	ST1-2				
	ST3+	32		46	78
Paediatric Plastic Surgery / Burns	FY1				
	FY2				
	ST1-2				
	ST3+				
Paediatric Trauma and Orthopaedic Surgery	FY1				
	FY2				
	ST1-2				
	ST3+				

Total for Women and Children's: 6141.3 Locum hours (11.8 WTE)

UHBW Resident Locum Report for Quarter: February, March, April 2025

Division of Diagnostics and Therapies. Hours.

Speciality	Grade	Bank	Agency	Nest	Total
Radiology	FY1				
	FY2				
	ST1-2			8	8
	ST3+			48	48
	Unknown			647	647
Microbiology	FY1				
	FY2				
	ST1-2				
	ST3+				
Laboratory Medicine	FY1				
	FY2				
	ST1-2				
	ST3+				

Total for D&T: 703 Locum hours (1.4 WTE)

UHBW Resident Locum Report for Quarter: February, March, April 2025

Division of Trust / Other. Hours

Speciality	Grade	Bank	Agency	Nest	Total
Clinical Teaching Fellow	FY1				
	FY2				
	ST1-2				
	ST3+				
Occupational Health	FY1				
	FY2				
	ST1-2				
	ST3+				
Other	FY1				
	FY2				
	ST1-2				
	ST3+				